

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

11

Application Number

10/698,595

Filing Date

October 31, 2003

First Named Inventor

HAROLD A. BROKISH

Art Unit

1638

Examiner Name

M. IBRAHIM

Attorney Docket Number

1440-004

ENCLOSURES (check all that apply)

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input checked="" type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | 1. Certificate of Express Mail |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) _____ | Label No. EV690533421US. |
| <input type="checkbox"/> Certified Copy of Priority Documents | <input type="checkbox"/> Landscape Table on CD | 2. ATCC Deposit Receipt, 1 page |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	JONDL & ASSOCIATES P.C.		
Signature			
Printed Name	KENYON L. SCHUETT		
Date	SEPTEMBER 20, 2005	Reg. No.	44,324

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Date: August 24, 2005

To: Kenyon L. Schuett

1440-004

Fax Number: 303-799-6898

From: ATCC Patent Depository **Number of pages:** 1 (Including this page)

REFERENCE: Patent Deposit

Description: Corn *Zea Mays* (L.): KWU7104 assigned ATCC No. PTA-6870.

Date of Deposit: July 19, 2005. The ATCC Certificate of Deposit will be forwarded to you within 30 days. The following fees will be charged to the MasterCard account of Harold A. Brokish:

Total fees for PTA-6870
(storage/informing/viability testing)

\$2,500.00


Tanya Nunnally, Patent Specialist
ATCC Patent Depository

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